

Work Order ID 89784

89784

Page 1

September 6, 2012 11:18:31 AM

Item ID: D2011-101 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: 6" Mirror
 Start Date: 9/06/12 Start Qty: 50.00 *50* Cust Item ID:
 Required Date: 9/14/12 Req'd Qty: 50.00 *50* Customer:
 Reference:

Approvals: Process Plan: CL Date: 12/09/06 Tooling: _____ Date: _____
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
 Run Start *NR1*
 Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Setup/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D2011	Rev G

100

0.00

100

PURCHASING

Purchasing

Memo

0.00

Purchasing

Issue P/O: 17844 Mirror P/N: CHM10601 Possible supplier:
 Auto Parts ExtraMaterial release note required

R1209-6

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Eisure material certification is attached

R1209/17 50

120

QC6- Inspect dimensions to drawing

0.00

120

QC

Memo

0.00

Quality Control

DAS 16 nlalu

WTS X50

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 89784

September 6, 2012 11:18:31 AM

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Page 2

Item ID: D2011-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: 6" Mirror

Start Date: 9/06/12 Start Qty: 50.00

50

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 50.00

50

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00

130

Small Fab

Small Fab

Memo

0.00

Small Fab

1- Wrap mirror with plastic wrap

2- Discard Hardware & Install new hardware loosely

3- Crimp stud as per Dwg D2011

140

0.00

140

QC5- Inspect part completeness to step on W/O

QC

Memo

0.00

Quality Control

4- Test assembly to 50lbs pull test after 24 hours

150

0.00

150Identify as per dwg & Stock Location: ST

Packaging

Memo

0.00

Packaging

229

492 1 12/11/20

→

49
Count

10/11/23 (59)

NCR: ☒ Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: *AK*

Date: 12/12/04

QA Closed: *CK*

Date: 11

Work Order: <u>D 2011-101</u>				DISPOSITION		AGAINST DEPARTMENT/PROCESS							
Part No. <u>B 89784</u>				Rework <input type="checkbox"/>		Skid-tube <input type="checkbox"/>		Crosstube <input type="checkbox"/>		Water Jet <input type="checkbox"/>		Engineering <input type="checkbox"/>	
NCR No. <u>12-2081</u>				Scrap <input checked="" type="checkbox"/>		Machining <input type="checkbox"/>		Small Fab <input checked="" type="checkbox"/>		Prod. Eng. Coord. <input type="checkbox"/>		Quality <input type="checkbox"/>	
				Use-as-is <input type="checkbox"/>		Thermoforming <input type="checkbox"/>		Finishing <input type="checkbox"/>		Rec/Store/Packaging <input type="checkbox"/>		Other <input type="checkbox"/>	
				Work Order Update <input type="checkbox"/>		Large Fab <input type="checkbox"/>		Composite <input type="checkbox"/>		Supplier <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup	12/11/20	130	1	1 mirror is scrap after intell D2829 had to pass a tread top + de D2829 after all the operation when deeper in the mirror bracket + tread was damage	DAS 16 2-32 Q57012 12/14/22	Scrap + destroy no replace \$ 37.61	SB 12/11/20	DAS 15 2-32 12/11/20	DAS 16 2-32 Q57012 12/14/22
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY			
Landing Gear		General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input checked="" type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	- not clamps tight enough
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	

Work Order ID 89784

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Page 3

Item ID: D2011-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: 6" Mirror

Start Date: 9/06/12 Start Qty: 50.00

50

Cust Item ID:

Required Date: 9/14/12 Req'd Qty: 50.00

50

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

160

QC21- Final Inspection - Work Order Release

0.00

160

QC

Memo

0.00

Quality Control

12/11/2012

mf
12-11-23

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Picklist Print

September 6, 2012 11:18:30 AM

Page 1

Work Order ID: 89784

Parent Item: D2011-101

Parent Item Name: 6" Mirror

Start Date: 9/06/12

Required Date: 9/14/12

Start Qty: 50.00

Required Qty: 50.00

Comments: IPP: J04.09.15 Added Steps 5-7 KJ/JLM IPP: K05.12.15 chg black sikaflex for white EC IPP L 08.11.06 new drawing EC verify: DD IPP: M 08.12.19 Added step 3 KJ Verified by: LL IPP rev N 10.01.13 added wrap per ncr09-118 EC verified by: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
* AN960JD416L Washer	NAS1149D0416J	Purchased	No			110	Each	6.0000	1	50		9/12/12	
				4D M122441 40K	M123741	9X							
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
					110153	6							
CHM-10601 Mirror 6"		Purchased	No			130	Each	50.0000	1	50		9/12/12	89784
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST		50							
				86647		50							
D2829 Threaded Stud		Manufactured	No			130	Each	2.0000	1	50		9/12/13	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				GA		2							
				87624		2							
D3014-1 Locknut		Manufactured	No			130	Each	71.0000	1	50		9/12/12	
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				ST023		71							
				18605		10							
				79705		61							
										50			

NCR: Yes / No

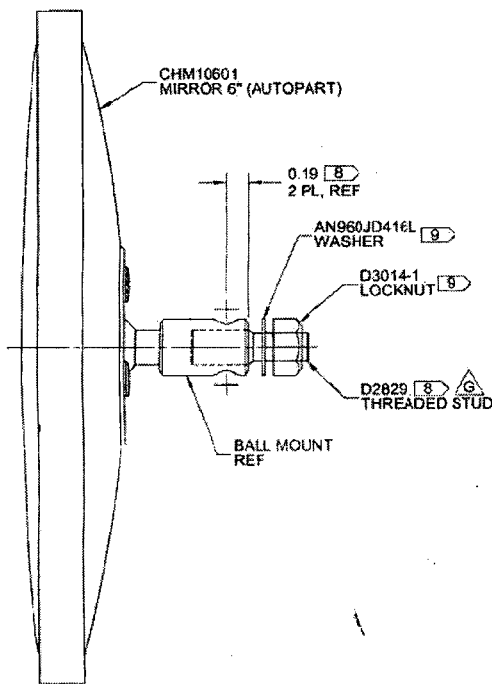
WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

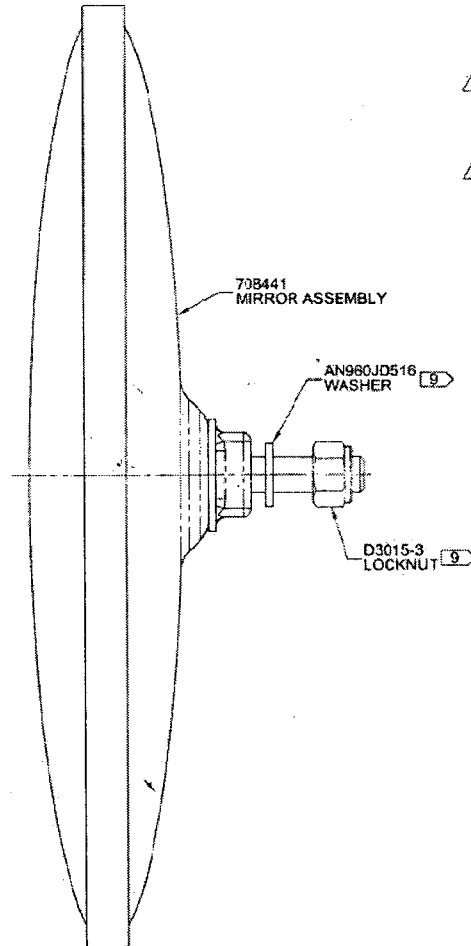
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Other
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong		
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge		
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset				
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration				
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence				
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions				



D2011-101 MIRROR ASSEMBLY 6"



D2011-103 MIRROR ASSEMBLY 8"

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: D2011-101 = 0.6 lbs APPROX. ; D2011-103 = 1.0 lbs APPROX.
- 8) D2829 INSTALLATION PROCEDURE:
 - APPLY LOCKTITE 262 TO $\phi 5/16$ END OF D2829
 - THREAD BY HAND INTO BALL MOUNT UNTIL ENTIRE $\phi 5/16$ END OF D2829 IS WITHIN BALL MOUNT
 - CRIMP BALL MOUNT ON TWO OPPOSING SIDES, 0.19 FROM END AS ILLUSTRATED USING TOOL DT8317
 - CRIMP TO DEPTH OF 0.040 \pm 0.010 USING R0.125
- 9) INSTALL LOOSE

CL12109/06
W10: 89784

ITEM	QTY -101	QTY -103	P/N	DESCRIPTION
1	X		D2011-101	MIRROR ASSEMBLY 6"
2		X	D2011-103	MIRROR ASSEMBLY 8"
3	1		D2829	THREADED STUD
4	1		D3014-1	LOCKNUT
5		1	D3015-3	LOCKNUT
6	1		CHM10601	MIRROR 6" (AUTOPART)
7		1	708441	MIRROR 8" (VELVAC)
8	1		AN980JD416L	WASHER
9		1	AN980JD516	WASHER

RELEASED
06-10-29

G	REDRAWN IN SOLIDWORKS TO CURRENT STANDARD AND TRANSFERRED TO "B" SIZE FORMAT. MIRROR 6" (AUTOPART) AND CHM10601 WERE MIRROR 6" (GROTE) AND P/N 28043 (ZN D3-1). ADDED D2829 (ZN D3-1 AND ZN D3-1). REMOVED DRILLING NOTE, VIEW A-A AND SIKAFLEX APPLICATION NOTE. REASON: GROTE PRODUCT IS DISCONTINUED.	MB	06.10.06
F	ADD HOLES FOR SEALANT ON -101	CP	04.09.10
E	NEW 8" MIRROR	CP	01.05.08
D	NEW 6" MIRROR, ADD NUT, REMOVED STUD	CP	01.04.23
C	REPLACE DOMINION AUTO MIRRORS WITH PHILLIPS, ADDED STUDS, REDRAWN	RF	99.06.01
B	SIKAFLEX 241 ADDED	JB	98.04.09
A	DWG NO. WAS DSP1011, ADDED -103	JB	90.06.16
-	NEW ISSUE	JB	90.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN	JB		
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	08.10.06		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D2011** REV. G
SHEET 1 OF 1
TITLE **MIRROR ASSEMBLY** SCALE NTS

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NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work-Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other



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1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17844

Purchase Order Date 9/6/2012

PO Print Date 9/6/2012

Page Number 1 of 1

Order From :

VC-AUT001

AUTO PARTS EXTRA
1000 RUE LANSDOWNE
HAWKESBURY, ON K6A 1H7
CA

FAXED
9-06-12
pl

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

613 632 1191

613 632 2350

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Brigitte Golden

10127-2607

Net 30

CAD

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	CHM-10601	Mirror 6"	9/6/2012 Yes	50.00 Each	Yours ppd	\$20.7500	\$1,037.50

Special Inst: As per DWG: D2011
Rev: .G
B89784

PO Total:

\$1,037.50

Change Nbr: 2

Change Date: 9/6/2012

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required (YES) NO



**AUTO PARTS • PIÈCES D'AUTO
TRUCK PARTS • PIÈCES DE CAMION
PERFORMANCE PARTS • PIÈCES DE PERFORMANCE
TIRES • PNEUS**



www.bensonautoparts.com

Past due accounts bear 2% interest per month (24% per annum). If this account is placed with a 3rd party collection, an administrative cost of 25% will be added. All exchanges and refund claims must be accompanied by this invoice. Electrical parts not returnable. All parts returned are subject to 20% handling charge. All merchandise sold on this invoice remains the vendor's property until this invoice is paid in full.

Aucun remboursement sans cette facture. Net 30 jours, 2% de frais d'intérêt par mois (24% par année) sur compte en souffrance. 20% de frais de manutention sur toute marchandise retournée. Clause pénale: une indemnité de 25% sera chargée sur compte sujet à des procédures légales. Les marchandises mentionnées sur cette facture demeurent la propriété du vendeur tant qu'elles ne seront pas entièrement payées. Pièces électriques non-retournables.

SIGNATURE

1000 RUE LANDSDOWNE
TEL: (613) 632-1191

HAWKESBURY, ON K6A 1H7
FAX: (613) 632-2350

TVQ: 1016330716 TQ0001 - NST / TPS: 10035 3366 RT0003

Thank
You

WHEELS SHOULD BE TORQUED AFTER 100KMS THANK YOU FOR YOUR BUSINESS

011

DATE: 9/07/12
07:38

11MLMLP

17844

113336 (613) 632-5200		113336		011					
PART AEROSPACE LTD.		EXPEDITE		DATE: 9/07/12					
270 ABERDEEN STREET		*** SAME ***		07:38					
HAWKESBURY ON K6A 1K7		A		11MLMLP					
ORD / COM	SHIP / EXP	CODE	PART No / PIÈCES	DESCRIPTION	LIST / CHACUN	CGST / COÛTANT	EXTENSION		
50	50	TWD>	CHM10601	6 CONV. MIRROR, S/ BOV: TWD		20.75	1037.50		
	50	***	twd / 22740	PIECES/CORE TOT 242					
			SHIP VIA						
INVOICE No / FACTURE		TYPE / SORTE		TOTAL	DISC / ESC	FRT / TRANS	HST / TPS	TVQ	AMT. TO PAY / À PAYER
11169383		INVOICE		1037.50	0.00	0.00	134.88	0.00	1172.38